

VISTA HEALTH PLAN (HMO)

COVERAGE PLAN DESCRIPTION	A not for profit Health Maintenance Organization with an extensive network of Primary and Specialty Care Providers and Hospitals. As one of the largest and oldest HMO's in the country, Vista is committed to providing access to quality health care services and to promoting healthy lifestyles to its members through prevention and early treatment of disease. Employees must select a primary care physician from the participating provider network. Website : www.vistahealthplan.com
DEDUCTIBLES/COPAYMENTS	Co-payments \$10 Physician office visit \$25 Emergency Room (waived if admitted) \$10/\$20/\$30 Prescriptions for 30 day supply based on formulary \$20 Generic/\$40 Brand Mail order prescriptions available for 90 day supply
PHYSICIANS	Choose any primary care physician from Vista's participating provider list. Covered family members may choose their own primary care physician.
IN-HOSPITAL PHYSICIAN SERVICES: A. Surgery/Visits & Consultations B. Anesthesiologist	Benefits payable at 100% when received at participating hospitals and arranged by the member's primary care physician.
OUT-PATIENT PHYSICIAN SERVICES: Office visits for illness Office visits for injury Diagnostic X-Rays, Lab Tests, X-Ray Treatments Pediatrician 1) Medically Necessary (Illness) 2) Preventive (Child Health Supervision Services) Routine Physical Obstetrical/Gynecological	\$10 copayment, 100% thereafter. \$10 copayment per visit, 100% thereafter. 100% when coordinated by your VISTA Primary Care Physician. 1. \$10 copayment per visit 2. 100%, no copay \$10 copayment per visit Annual Well Women Exam available without referral, \$10 copayment. All other OB/GYN visits require a referral, \$10 copayment per visit.
Hospitalization *Note: These hospitals are not full service hospitals but are contracted for specialty or specific services only.	Benefits payable at 100% at following affiliated hospitals: MIAMI-DADE COUNTY Anne Bates Leach • Baptist • Coral Gables • Jackson South • Health South Doctors Hospital • Hialeah • Mercy • Miami Children's • Miami Heart Institute-South • Mt. Sinai • North Shore • Palmetto General • Parkway Regional • SMH Homestead • South Miami • South Shore • University of Miami/Jackson Memorial Hospital & Clinics BROWARD COUNTY Broward General • Coral Springs • Florida Medical • Hollywood Medical • Imperial Point • Memorial • Memorial Regional • Memorial West • North Broward • North Ridge
Hospital/Surgical Requirements: Precertification of hospital confinements	All non-emergency inpatient confinements and outpatient surgeries are preauthorized through Vista.
Drug & Alcohol Treatment Inpatient:	Covered at 100% up to 30 inpatient rehab days per calendar year. Impatient detox; no copayment, 7 days per calendar year
Outpatient:	Up to 30 outpatient visits per calendar year. \$10 copayment applies.
Mental & Nervous Disorders Inpatient:	Covered at 100% up to 30 inpatient days per calendar year.
Outpatient:	Up to 30 outpatient visits per calendar year. \$10 copayment applies.
Other Services Ambulance	100% when medically necessary.

Vision	\$15 copayment for annual eye exam. Vista offers vision services through participating locations listed in our directory. Please refer to your Vista package for a complete list of benefits.
Prescription Drugs	\$10 copayment per generic/\$20 per brand/\$30 non-formulary for a 30 day supply at participating pharmacies including prescription contraceptives. Mail Order \$20 Generic, \$40 Brand for 90 day supply (formulary only). If member selects brand when generic is available, member pays difference in cost plus brand copay
Durable Medical Equipment (DME)	Covered at 100%
Out of Area 1. Emergency 2. Non-emergency	\$25 copayment (worldwide), waived if admitted Not covered
	See plan literature for complete list of benefits, including all copayments and discounts.